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## FILING DATE **CLAIMS ONLY** APPLICANT(S) CLAIMS AFTER 1st AMENDMENT AFTER AS FILED 2nd AMENDMENT DEP. IND. DEP. DEP. IND. DEP. DEP. DEP. A) Œ Œ) Ć <del>(</del>() TOTAL IND. TOTAL IND. TOTAL DEP. TOTAL DEP.

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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